


<b>Issue Classification</b> 	Application/Control No.	Applicant(s)/Patent under Reexamination	
	09/002,648	HORNE, DAVID M.	
	Examiner	Art Unit	
	Temesghen Ghebretinsae	2637	

ISSUE CLASSIFICATION												
ORIGINAL					CROSS REFERENCE(S)							
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)						
375		146			375	140						
INTERNATIONAL CLASSIFICATION												
H	0	4	B	1/707								
				/								
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				/								
				/								
(Assistant Examiner) (Date) <i>Rekey 5/11/05</i> (Legal Instruments Examiner) (Date)					Temesghen Ghebretinsae 05/05/05 (Primary Examiner) (Date) <i>5/10/05</i>					Total Claims Allowed: 9		
										O.G. Print Claim(s)	O.G. Print Fig.	
										1	2b	

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant												<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original		
1	1		31		61		91		121		151		181				
	2		32		62		92		122		152		182				
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	6		36		66		96		126		156		186				
	7		37		67		97		127		157		187				
	8		38		68		98		128		158		188				
2	9		39		69		99		129		159		189				
3	10		40		70		100		130		160		190				
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	23		53		83		113		143		173		203				
	24		54		84		114		144		174		204				
8	25		55		85		115		145		175		205				
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4	27		57		87		117		147		177		207				
5	28		58		88		118		148		178		208				
6	29		59		89		119		149		179		209				
	30		60		90		120		150		180		210				

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<b>SERIAL NUMBER</b> 09/002,648	<b>FILING DATE</b> 01/05/98	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2734	<b>ATTORNEY DOCKET NO.</b> 042390.P5113
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APPLICANT

DAVID M. HORNE, CHANDLER, AZ.

*NONE*

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
 VERIFIED  
TG

*NONE*

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
 VERIFIED  
TG

*NONE*

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
 VERIFIED  
TG

FOREIGN FILING LICENSE GRANTED 04/01/98

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> AZ	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> <del>3</del> 9	<b>INDEPENDENT CLAIMS</b> 1
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Verified and Acknowledged TG Examiner's Initials                      Initials

ADDRESS

BLAKELY SOKOLOFF TAYLOR AND ZAFMAN  
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TITLE

METHOD FOR USING ENCODED SPREADING CODES TO ACHIEVE HIGH BIT DENSITIES IN A DIRECT-SEQUENCE SPREAD SPECTRUM COMMUNICATION SYSTEM

<b>FILING FEE RECEIVED</b>  \$790	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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